## REQUEST FOR DONATED LEAVE

### Hurricane Katrina

1. President Bush has requested the Office of Personnel Management (OPM) to establish an Emergency Leave Transfer Program (ELTP), to assist employees affected by Hurricane Katrina. Despite it being a year ago, many employees in the Gulf Region remain affected by Katrina and its aftermath. Your donated leave will be transferred to emergency leave recipients who have been adversely affected by this disaster and who need additional time off from work.

2. If you would like to donate your **annual leave**, please complete OPM Form 1638, Request to Donate Annual Leave Under the Emergency Leave Transfer Program (available at www.opm.gov/forms/html/opm.asp), and forward it to OTAG, ATTN: CAJS-J1-HR-CS (Lisa Nagata – Box #37).

3. The following instructions apply to leave donors:

    a. Only **annual leave** may be donated.

    b. You may not donate leave to your immediate supervisor.

    c. In any one leave year, a donor may donate no more than a total of one half of the amount of annual leave he/she would be entitled to accrue during the leave year in which the donation is made (example: An employee who earns 208 hours of leave during the year may donate a maximum of 104 hours).

4. If you need additional information, contact Lisa Nagata at CAGNET 6-3601, DSN 466-3601 or (916) 854-3601.

STUART D. EWING
Captain, CA ANG
Deputy Human Resource Officer

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# Request to Donate Annual Leave Under the
# Emergency Leave Transfer Program

I request that my annual leave be transferred to the emergency leave transfer program established by the Office of Personnel Management. As of the date indicated below, I have enough annual leave in my account to cover this amount. I understand I may not donate more than 104 hours of annual leave under the emergency leave transfer program, unless otherwise permitted by my agency.

I understand that my decision to transfer leave is not revocable. If a sufficient balance of unused donated leave remains after the emergency has terminated, I understand that a pro-rated share will be returned to me either during the current leave year or the following leave year. However, to recredit my leave, I must remain employed by a Federal agency and be subject to chapter 63 of title 5, United States Code. I have not been directly or indirectly intimidated, threatened or coerced, or promised any benefit by an employee for the purpose of donating or using leave.

## Completed Form Must Be Submitted to Employing Agency

| 1. Applicant's name *(Last, first, middle)* | | 2. Employee or Social Security Number |
|---|---|---|
| 3a. Position title | 3b. Pay plan | 3c. Grade/pay level |
| 4. Name of organization *(Agency, Department, Office, Division, Branch, etc.)* | | 5. Office telephone number |

| 6. Amount of annual leave accrued as of end of last pay period | 7. Amount of annual leave to be donated |
|---|---|

8. Major disaster or emergency declared by the President

| 9a. Signature | 9b. Date signed |
|---|---|

**Privacy Act Statement**
Participation in this program is voluntary; however, solicitation of this information is authorized under 5 U.S.C. 6391. The information furnished will be used to identify records properly associated with the transfer of annual leave. It may also be disclosed to a national, State, or local law enforcement agency where there is an indication of a violation or potential violation of civil or criminal law, rule, or regulation; or to another agency or court when the Government is party to a suit. Public Law 104-134 (April 26, 1996) requires that any person doing business with the Federal Government furnish a social security number or tax identification number. This is an amendment to title 31, Section 7701. Furnishing the social security number, as well as other data, is voluntary, but failure to do so may delay or prevent action on the application. If your agency uses the information furnished on this form for purposes other than those indicated above, it may provide you with an additional statement reflecting those purposes.

Office of Personnel Management

5 CFR 630

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